

Instructions for the Miscellaneous Tasks Reimbursement Worksheet

General Instructions:

This reimbursement worksheet shall be completed, per 401 KAR 42:250, Section 9, to initiate reimbursement for actions required that may not be directed by the cabinet or included on other reimbursement worksheets. The formulated task rates used in this worksheet shall include facility visits, scheduling, oversight personnel, labor, equipment and material needed in order to perform the listed actions, per 401 KAR 42:250, Contractor Cost Outline.

For items #1 and #2 below, reimbursement shall be contingent upon the Underground Storage Tank Branch completing a technical review and making a determination that the required report is complete and meets the requirements of 401 KAR Chapter 42.

If the total cost of one unscheduled maintenance event, in item #5 below, will exceed \$3,000, as stated in Section 9(1)(f) of 401 KAR 42:250, the Cost Estimate Form DEP 6090, shall be completed, submitted and approved prior to work being performed. Equipment repair costs covered by an equipment warranty are not reimbursable.

A deduction from the submitted claim shall be made to accommodate for the entry level amount, in accordance with KRS 224.60-120(1), unless previously deducted from prior claim payments.

General Information:

Application Number: Enter the Application Number assigned for this occurrence.

Agency Interest Number: Enter the Agency Interest Number.

Completion of Reimbursement Worksheet

1. Disposal or Treatment of Soil and Water from Within the Excavation Zone, Contaminated above Applicable Screening Levels at the Time of Permanent Closure.

NOTE: If optional soil removal outside the excavation zone, in accordance with Section 6 of the Closure Outline, has also been performed, the request for reimbursement of contaminated material and water within the excavation zone shall be submitted on the Optional Soil Removal Outside of the Excavation Zone Reimbursement Worksheet, DEP6094. Laboratory analysis shall exceed the applicable screening levels to substantiate the need for the transportation and disposal or treatment of contaminated material or water at a permitted facility.

- a. Transportation and Disposal or Treatment of Contaminated Material at a Permitted Facility.** Enter the tonnage of the contaminated material removed and disposed or treated from within the excavation zone. Reimbursement shall be contingent upon verification through the submittal of weigh tickets from the permitted disposal or treatment facility. Reimbursement shall be based upon the verified tonnage disposed or treated at the nearest permitted disposal or treatment facility. Weigh tickets from the permitted disposal or treatment facility shall be submitted with the Claim Request Form for Actions Not Directed by the USTB, DEP6064 to support the tonnage disposed or treated. If weigh tickets are not submitted to verify tonnage, reimbursement shall be made based on the actual area of over-excavation. The volume of the excavated area (cubic yards) shall be converted to tons utilizing a conversion factor of 1.5 (tons per cubic yard).

- b. **Purchase and Transportation of Backfill Material.** Enter the tons of backfill material purchased to replace the contaminated material transported and disposed of or treated in (a) above. Reimbursement shall be based upon the weigh tickets submitted, supporting the number of tons of backfill material purchased and transported from the nearest quarry. If the backfill is from a borrow area, reimbursement shall be based on the number of tons as determined in (a) above, unless documentation (weigh tickets) can be submitted to support actual tonnage. Backfill material necessary to replace the tank void volume is not reimbursable.
 - c. **Transportation of Contaminated Water Removed from Within the Excavation Zone.** Enter the number of gallons of water pumped from within the excavation zone. Reimbursement shall be based on the number of gallons identified on waste manifests submitted. Laboratory analysis shall substantiate the need for removal and disposal or treatment of water contaminated above the applicable screening levels.
 - d. **Disposal or Treatment of Pit Water or Groundwater at a Permitted Facility.** Enter the number of gallons of water disposed or treated. This number shall match (c) above and the waste manifests submitted. Laboratory analysis shall substantiate the need for removal and disposal or treatment, at a permitted facility, of water contaminated above applicable screening levels.
 - 2. **Initial Abatement.**
 - a. **Mobilization and Demobilization of Oversight Personnel to the Regulated Facility.** Enter the round trip mileage from the eligible company or partnership's nearest office to the regulated facility.
 - b. **Initial Abatement.** Complete by entering "1" in the space provided if initial abatement actions are undertaken at a regulated facility in accordance with Section 2 of the Release Response and Initial Abatement Requirements Outline.
 - 3. **Transportation and Disposal of Drummed Waste, Purged Water or Soil Cuttings.**
 - a. **Transportation.** Enter the number of drums transported. This shall correspond with the number of drums included on the waste manifest(s) submitted.
 - b. **Disposal.** Enter the number of drums disposed. Include the waste manifest(s) from the actual permitted disposal facility as an attachment. This number shall correspond with the number of drums listed on the waste manifest(s) from the permitted disposal facility.
 - 4. **Transportation and Disposal or Treatment of Purged Water via Holding Tank.**
 - a. **Transportation.** Enter the number of gallons transported. This shall correspond with the number of gallons included on the waste manifest(s) submitted.
 - b. **Disposal or Treatment.** Enter the number of gallons disposed or treated at a permitted facility. This number shall correspond with the number of gallons listed on the waste manifest(s) from the permitted facility.
 - 5. **Pumping, Transportation and Disposal of Free Product from Within the Excavation Zone.**
 - a. **Pumping and Transportation.** Enter the number of gallons of free product pumped and transported. This shall correspond with the number of gallons included on the waste manifest(s) submitted.
 - b. **Disposal or Treatment.** Enter the number of gallons of free product disposed or treated at a permitted facility. This number shall correspond with the number of gallons listed on the waste manifest(s) from the permitted facility.
- NOTE: Eligible reimbursement is contingent upon the following:**
- 1. **Verification from Division of Waste Management Personnel or Environmental Response Branch Personnel documenting the presence of phase-separated hydrocarbons, at a thickness of at least 4 inches, within an uncontained portion of the excavation zone prior to the removal of the phase-separated hydrocarbons.**
 - 2. **Documentation that a passing Tank and Line Tightness test has been performed within X hours before or after the removal of the free product (for free product**

found while conducting a TLT. Or a passing Tank and Line Tightness test has been conducted after – work on wording.

6. **Encroachment Permit Renewal.** Enter the number of encroachment permit renewals requested for reimbursement. Include a copy of the original permit, the cancelled check and the renewal bond for each.

7. **Unscheduled Maintenance of a Remediation System.**

NOTE: If the total cost of one unscheduled maintenance event will exceed \$3,000, as stated in Section 9(1)(f) of 401 KAR 42:250, the Cost Estimate Form DEP 6090, shall be completed, submitted and approved prior to work being performed. Equipment repair costs covered by an equipment warranty are not reimbursable.

- a. **Mobilization and Demobilization of Oversight Personnel to the Regulated Facility.** Enter the round trip mileage from the eligible company or partnership's nearest office to the regulated facility.
- b. **Per Diem.** Enter the number of overnight stays for personnel providing oversight and submit copies of hotel receipts and time sheets supporting the need for overnight stay with the worksheet, if applicable. Per diem reimbursement for non supervisory personnel has been integrated into the formulated task rates established.
- c. **Unscheduled Maintenance.** Enter the number of unscheduled events and include an explanation of actions taken during each event. If equipment is purchased for replacement, enter the cost of the equipment and include the replacement equipment invoice as an attachment.